



**ROBERT W. STROZIER, P.L.L.C.**

A FIRM SPECIALIZING IN INTELLECTUAL PROPERTY LAW INCLUDING  
PATENT, TRADEMARK, COPYRIGHT, TRADE SECRET LAW,  
UNFAIR COMPETITION AND RELATED MATTERS

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9.18.01

April 23, 2001

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AUG 28 2001

Office of Initial Patent Examination  
Assistant Commissioner for Patents  
Customer Service  
Washington, DC 20231

Technology Center 2100

RE: **U.S. Ser.No.: 09/713,674; Filed: 15 November 2000**  
**Titled Manipulation, Correlation and Display of Multi-Dimensional**  
**Data.**  
**Our Ref. No.: 95626/04UTL**

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Dear Sir/Madam:

Please find enclosed for your records the photocopies of the *OFFICIAL FILING RECEIPT* for the above-referenced matter. Please correct the **Attorney Docket Number** to read as follows:

**95626/04UTL**

Thank you for your assistance with this matter and should you have any questions or comments, please call me.

Very Truly Yours,

*Robert W. Strozier/sls*

Robert W. Strozier

RWS/sls  
Enclosure

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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/713,674	11/15/2000	2173	0.00	95626UTL	55	22	11

95626/04 JTL

CONFIRMATION NO. 5336

23873  
ROBERT W STROZIER, PLLC  
2925 BRIARPARK, SUITE 930  
HOUSTON, TX 77042

## FILING RECEIPT



\*OC000000005889599\*

Date Mailed: 03/22/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

Mohammed S. Anwar, Residence Not Provided;

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## Continuing Data as Claimed by Applicant

THIS APPLN CLAIMS BENEFIT OF 60/165,427 11/15/1999  
AND CLAIMS BENEFIT OF 60/189,925 03/16/2000

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## Foreign Applications

If Required, Foreign Filing License Granted 03/21/2001

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Projected Publication Date:

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Non-Publication Request: No

R W STROZIER, PLLC

Early Publication Request: No

DOCKETED

\*\* SMALL ENTITY \*\*

## Title

Programs and methods for the display, analysis and manipulation of multi-dimensional data  
implemented on a computer

**Preliminary Class**

**345**

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**Data entry by : PETROS, ZENEBECH**

**Team : OIPE**

**Date: 03/22/2001**



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Title 37, Code of Federal Regulations, 5.11 & 5.15**

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Bib Data Sheet

CONFIRMATION NO. 5336

<b>SERIAL NUMBER</b> 09/713,674	<b>FILING DATE</b> 11/15/2000 <b>RULE</b>	<b>CLASS</b> 345	<b>GROUP ART UNIT</b> <del>2173</del> 2674	<b>ATTORNEY DOCKET NO.</b> 95626/04UTL
<b>APPLICANTS</b> Mohammed S. Anwar, Houston, TX;				
<b>** CONTINUING DATA ***** OK</b> THIS APPLN CLAIMS BENEFIT OF 60/165,427 11/15/1999 AND CLAIMS BENEFIT OF 60/189,925 03/16/2000				
<b>** FOREIGN APPLICATIONS ***** No 37</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 03/21/2001</b>				
<b>** SMALL ENTITY **</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	<b>STATE OR COUNTRY</b> TX	<b>SHEETS DRAWING</b> 55	<b>TOTAL CLAIMS</b> 22	<b>INDEPENDENT CLAIMS</b> 11
Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>				
<b>ADDRESS</b> 23873				
<b>TITLE</b> Programs and methods for the display, analysis and manipulation of multi-dimensional data implemented on a computer				
<b>FILING FEE RECEIVED</b> 758	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	